BCC NAME AREA BOARD XIII-STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

COUNTY DEPARTMEN 750 B Street #1		830, SD, CA 92101		CONTACT PERSO	Mary Ellen Stives	
PHONE NUMB	ER 619 645-3000	MAILSTO	<i>OP</i> P-511E	FAX NUMBER	619 645-3008	
MEMBER NAME	Albritton, Moira Kathryn					
APPOINTMENT	1/28/2003 <i>MO</i> #	25	EXPIRATION	12/31/2005	TERM	3-YEARS
NOMINATED BY	Health Services Advisory Board		APPOINTED BY	Board of Supervisors		
REQUIREMENT	PARENT		COMMENTS			
MEMBER NAME	Blair, Beth					
APPOINTMENT	9/21/2004 <i>MO</i> #	15	EXPIRATION	12/31/2006	TERM	3-YEARS
NOMINATED BY	Health Services Advisory Board		APPOINTED BY	Board of Supervisors		
REQUIREMENT	CONSUMER		COMMENTS	2nd term.		
MEMBER NAME	Heitzmann, Sylvia Luce					
APPOINTMENT	11/30/2004 <i>MO#</i>	15	EXPIRATION	12/31/2007	TERM	3-YEARS
NOMINATED BY	Health Services Advisory Board		APPOINTED BY	Board of Supervisors		
REQUIREMENT	General Public-PARENT		COMMENTS	2nd Term		
MEMBER NAME	Kay, Lori J.					
APPOINTMENT	2/27/2007 <i>MO</i> #	17	EXPIRATION	12/31/2009	TERM	3-YEARS
NOMINATED BY	Health Services Advisory Board		APPOINTED BY	Board of Supervisors		
REQUIREMENT	PARENT		COMMENTS	1st appt; 2/27/07		
MEMBER NAME	Macklem, Nancy					
APPOINTMENT	9/20/2005 <i>MO#</i>	28	EXPIRATION	12/31/2007	TERM	3-YEARS
NOMINATED BY	Health Services Advisory	Board	APPOINTED BY	Board of Supervisors		

Friday, January 18, 2008 Page 20 of 214

COMMENTS

To fill unexpired term of Jan Frazier-Prentice

who resigned July 2004.

REQUIREMENT

General Public-PARENT

BCC NAME AREA BOARD XIII-STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

COUNTY DEPARTMEN 750 B Street #1830, SD, CA 92101 CONTACT PERSO Mary Ellen Stives

PHONE NUMBER 619 645-3000 **MAILSTOP** P-511E **FAX NUMBER** 619 645-3008

MEMBER NAME Priest, Teresa

APPOINTMENT 3/14/2006 MO# 16 EXPIRATION 12/31/2008 TERM 3-YEARS

NOMINATED BY Health Services Advisory Board APPOINTED BY Board of Supervisors

REQUIREMENT Consumer COMMENTS reappt 2nd term 3/14/06